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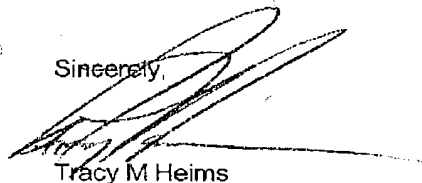
TO:	FROM:
Technology Center 1745	Tracy M. Heims
COMPANY:	DATE:
U.S. Patent & Trademark Office	8/12/2004
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
(703) 872-9306	32
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
(571) 272-1289	001-03-033
RE:	YOUR REFERENCE NUMBER:
Request for Reconsideration	SN: 09/807,214

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Please direct any questions concerning this application to Tracy M Heims at the phone number listed above.

Sincerely,



Tracy M Heims

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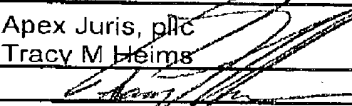
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/807,214	
	Filing Date	04/11/2001	
	First Named Inventor	Takaya Sato	
	Art Unit	1745	
	Examiner Name	Julian A Mercado	
Total Number of Pages in This Submission	31	Attorney Docket Number	001-03-033

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Declaration by Applicant and copies of references
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Apex Juris, PLLC Tracy M Heims
Signature	
Date	08/12/2004

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Tracy M Heims
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Date	08/12/2004

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Sato

Atty Docket #: 001-03-033

Serial Number: 09/807,214

Group Art Unit: 1745

Filed: June 1, 2001

Examiner: Julian A. Mercado

Title: ELECTRODE STRUCTURE, ELECTRIC COMPONENTS AND
MANUFACTURING METHOD

RECONSIDERATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

August 12, 2004

Sir:

In response to the Official Action of May 13, 2004, please reconsider the application in light of the following amendment and remarks. Applicant believes no extension of responsive term is necessary. However, should there be any deficiencies or need for further extension, application hereby petitions for any necessary extension and authorizes the Director to charge applicant's charge account 50-2069.